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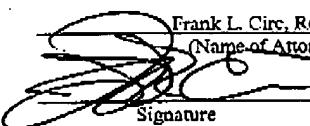
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DEC 07 2005

FACSIMILE COVER SHEET**TO:** Examiner: Steven E. Holton**FROM:** Frank L. Cire, Reg. No. 42,419**RE:** U.S. Application No. 09/930,453
 Attorney Docket No. 00862.022332.**FAX NO.:** (571) 273-8300**DATE:** December 7, 2005 **NO. OF PAGES:** 13
*(including cover page)***TIME:** 3:40 p.m. **SENT BY:** Gina Marie**MESSAGE**

Attached are the following papers for the above-identified application:

1. Amendment; and
2. Transmittal for Amendment.

I hereby certify that this correspondence is being facsimile transmitted to
 the U.S. Patent and Trademark Office on:December 7, 2005
 (Date of Deposit)Frank L. Cire, Reg. No. 42,419
 (Name of Attorney for Applicant)

December 7, 2005
 Date of Signature

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00862.022332.

DEC 07 2005

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
AKIHIRO OUCHI, ET AL.)	Examiner: Steven E. Holton
Application No.: 09/930,453)	Group Art Unit: 2673
Filed: August 16, 2001)	
For: ELECTRONIC BOARD)	
APPARATUS AND DATA)	
PROCESSING METHOD FOR)	
ELECTRONIC BOARD)	
APPARATUS)	December 7, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated September 7, 2005, please amend the above-identified application, as follows:

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

December 7, 2005
(Date of Deposit)

Frank L. Circ, Reg. No. 42,419
(Name of Attorney for Applicant)

Signature _____ Date of Signature _____

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In re Application of:

AKIHIRO OUCHI, ET AL.

Application No.: 09/930,453

Filed: August 16, 2001

For: ELECTRONIC BOARD APPARATUS AND DATA APPARATUS AND DATA PROCESSING METHOD FOR ELECTRONIC BOARD APPARATUS

Docket No.

00862.022332

Examiner: Steven E. Holton

Group Art Unit: 2673

Date: December 7, 2005

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17	MINUS	20	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	3	MINUS	3	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$_____ is enclosed.

Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

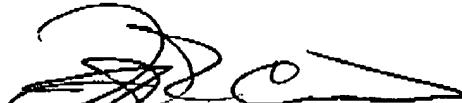
Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.

A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank L. Cire
Attorney for Applicants
Registration No.: 42,419

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Form #120

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PAGE 13/13 *RCVD AT 12/7/2005 6:40:06 PM [Eastern Standard Time]* SVR:USPTO-EFXRF-6/29 * DNI:2738300 * CSID:714 540 9823 * DURATION (mm:ss):03:34